

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M.G.		1/27/00
O.I.P.E. CLASSIFIER		47	2/10/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	M.B.	70803	2-14

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
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Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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